

DECLARATION, POWER OF ATTORNEY AND PETITION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DUAL TRANSACTION AUTHORIZATION SYSTEM AND METHOD, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with 37 C.F.R. § 1.56(a).

I hereby declare: All statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true. These statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY

I appoint the following:

W. Poms, Reg. 18,782
G. P. Smith, Reg. 20,142
H. D. Jastram, Reg. 19,777
C. A. S. Hamrick, Reg. 22,586
A. C. Rose, Reg. 17,047
L. J. Bovasso, Reg. 24,075
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S. R. Hansen, Reg. 38,486
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M. D. Harris, Reg. 26,690
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whose address is:

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as my attorneys with full power of substitution and revocation, to prosecute said application and to transact in connection therewith all business in the Patent and Trademark Office and before competent International Authorities.

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, power of attorney, and this petition.

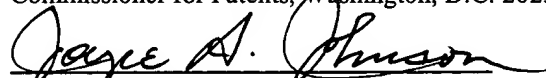
Full name of sole inventor: Harry Thomas Kloor

Inventor's signature Dr. Harry Kloor
Residence: 10989 Bluffsides Drive, #3403, Studio City, California 91604
Citizenship: U.S.A.
Post Office Address: 10989 Bluffsides Drive, #3403, Studio City, California 91604

Date 11/16/2000

00974018-11600

I hereby certify that on November 16, 2000, which is the date I am signing this certificate, I am depositing this correspondence the United States Postal Service, first class mail, in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231


Joyce A. Johnson

PATENT
Applicant: Harry Thomas Kloor
Serial No.: Unassigned
Filed: Unknown
Title: DUAL TRANSACTION
AUTHORIZATION SYSTEM AND
METHOD
Examiner: Unknown
Group Art Unit: Unknown

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner for Patents
Washington, D.C. 20231

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 C.F.R. §§ 1.9(F) AND 1.27(B))—INDEPENDENT INVENTOR

Applicant or Patentee: Harry Thomas Kloor

Serial or Patent No.:

Filed or Issued:

Title: "DUAL TRANSACTION AUTHORIZATION SYSTEM AND METHOD"

As a below-named inventor, I declare that I qualify as an independent inventor as defined in 37 C.F.R. § 1.9(c) for purposes of paying reduced fees under 35 U.S.C. §§ 41(a) and (b) to the Patent and Trademark Office with regard to this invention entitled, which is described in the specification filed with this declaration.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 C.F.R. § 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 C.F.R. § 1.9(d) or a non-profit organization under 37 C.F.R. § 1.9(e).

Choose one of the following two paragraphs and delete the other. If choosing this paragraph, list the persons or companies below. Each person, concern or organization to which I have assigned, granted, conveyed or licensed, or am under an obligation under contract or law to assign, grant, convey or license any rights in the invention is listed below:

Full Name: Harry Thomas Kloor

Address: 10989 Bluffs Drive, #3403, Studio City, California 91604

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I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. § 1.28(b))

I declare that all statements made in this document of my own knowledge are true. I believe all statements made on information and belief are true. I make these statements with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing from the application.

Nov. 16, 2000

Dr. Harry Thomas Kloor
Harry Thomas Kloor

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